

BUILDING SPACE LEASE AUTHORIZATION FORM

Building / Trailer # _____ Room # _____ Total area _____ sq. ft.
(Attach a list or marked key plan If more space is needed.)

Occupation Date: _____ Initial OFC Rate _____

End of Use Date: _____

Name: _____

Ext. #: _____ L-Code: _____ Department / Division _____

DESCRIPTION of USE of BUILDING SPACE (attach statement of work, if necessary):

IS BUILDING MODIFICATION PROPOSED? (YES/NO) If yes, give details.

☐ Standard ES&H RRAs from Document 2.1 apply to this space lease.

☐ Special ES&H RRAs (attached) apply to this space lease.

IWS or OSP REQUIRED? (YES/NO)

ES&H reviews, if required, will be done by the ES&H Team supporting the facility or area where the work is to be performed. The ES&H Team providing support is Team ____.

Account number provided for the following services:

*Space recharge and electricity will allow split of account #'s

Space Charge: _____ - _____ % _____ Electricity: _____ - _____
Space Charge: _____ - _____ % _____ Electricity: _____ - _____

Other Services: _____ - _____ Specify _____

Tenant RI: _____ Date: _____

Tenant

Resource Manager: _____ Date: _____

Tenant

Senior Manager: _____ Date: _____

AD Facility Manager,

Landlord: _____ Date: _____

Resource Manager,

Landlord: _____ Date: _____